

# Entry/Consent Form

Upon review of the guidelines regarding participation in the Kentucky Voter Education Video Contest:

I grant my permission to Kentucky Campus Compact and the Office of the Secretary of State to post the video I/we submit in the contest on the contest website for viewing by the public and for any other use by the *Kentucky Voter Education Video Contest* for the video;

I consent to any form of publicity (including the use of my name, and the likeness and voice) in connection with the *Kentucky Voter Education Video Contest's* use of the video;

I waive any claim to compensation arising from or related to the *Kentucky Voter Education Video Contest's* use of the video; and

I release the Kentucky Voter Education Video Contest from liability arising out of its use of the video in the contest for other purposes, if any.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_  
\_\_\_\_\_

**Telephone:** \_\_\_\_\_ **E-mail Address:** \_\_\_\_\_

**College/University:** \_\_\_\_\_

**Major Field of Study:** \_\_\_\_\_

**Expected Date of Completion/Graduation:** \_\_\_\_\_

**\*Signature of Parent or Guardian:** \_\_\_\_\_

Please print and mail this form to:

Office of the Secretary of State  
Student Video Voter Contest  
700 Capital Avenue, Suite 152  
Frankfort, KY 40601

\*The signature of a parent or guardian is required if entrant is under eighteen (18) years of age.